

Citizens for fairness in Politics

Name (print)

Office (if applicable)

District (if applicable)

## Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
David Tanner 2111 Homeview Ct Las Vegas, NV 89117	9/05/2002	1,500.00	

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Name (print)

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District (if applicable)

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EL201.doc

Revised: Apr-02

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## Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**\*\* NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

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## Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 29A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Time Printing 1224 Western Ave Las Vegas, NV 89102	D	9/01/2002	834.51
Passkey Systems 4395 Polaris ave Las Vegas, NV 89103	D D D	9/01/02 9/03/02 9/10/02	1,542.50 1,570.00 1,517.15

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## Expenses of \$100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY

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## IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN-KIND CONTRIBUTION	DESCRIPTION OF EACH IN-KIND CONTRIBUTION	VALUE OR COST OF EACH IN-KIND CONTRIBUTION	CHECK HERE IF LOAN

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**IN KIND**

**Contributions of \$100 or Less**

DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION

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### IN KIND

#### Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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**IN-KIND CAMPAIGN  
EXPENSES**

Report Period:

# 2

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**IN KIND****Expenses of \$100 or Less**

DATE OF EACH IN-KIND EXPENSE	VALUE OR COST OF EACH IN-KIND EXPENSE	DESCRIPTION OF EACH IN-KIND EXPENSE

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Prescribed by Secretary of State  
NRS 294A.120, 294A.140, 294A.150  
294A.200, 294A.210, 294A.220, 294A.362